

01/01/00
JCS
PTO

TRANSMITTAL OF
UTILITY
APPLICATION
UNDER 37
C.F.R. §1.53

Attorney Docket No.

18021-2901

(Box Seg)

First named inventor

Paul Sternberg

Express mail label #

EL516975777US

Date of mailing

January 6, 2000

Application Elements

1. Fee Transmittal Form
2. Specification containing 71 pages (including claims and Abstract) and a Sequence Listing (62 pages).
 - a. Title: POLYCYSTIC KIDNEY DISEASE GENE HOMOLOGS REQUIRED FOR MALE MATING BEHAVIOR IN NEMATODES AND ASSAYS BASED THEREON
 - b. Number of claims: 88
3. 5 sheets of drawings with 4 Figs.
4. Copy of Declaration from parent application
5. Sequence Listing (62 pages)
 Paper copy (identical to computer copy)
 Computer readable copy
 Verified statement

Accompanying Application Papers

6. Copy of assignment from prior
7. Copy of Small Entity Statements filed in priority application
8. Preliminary Amendment
9. Return Receipt Postcard

jc584 U.S. PTO
09/479467
01/06/00

SIGNATURE OF ATTORNEY/AGENT

HELLER EHRMAN WHITE & McAULIFFE

Stephanie Seidman
Registration Number: 33,779

Benefit of priority under 35 U.S.C. §119(e) to U.S. Provisional Application Serial No. 60/115,127, filed January 6, 1990 is claimed.

CORRESPONDENCE ADDRESS

NAME	Stephanie Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe	
Address	4250 Executive Square, 7th Floor, La Jolla, CA 92037	
	Telephone: 858.450-8400	Facsimile: 858.587-5360

**FEE TRANSMITTAL
ACCOMPANYING UTILITY
APPLICATION UNDER
37 C.F.R. §1.53**

Attorney Docket No.	1021-2901
First named inventor	Paul Sternberg
Express mail label #	EL516975777US
Date of mailing	January 6, 2000

FEE CALCULATION FOR CLAIMS AS AMENDED

a) Basic Fee	\$ 690.00
b) Independent Claims $\frac{15}{88} - 3 = \frac{12}{68} \times \$ 78.00$	\$ 936.00
c) Total Claims $\frac{88}{88} - 20 = \frac{68}{68} \times \$ 18.00$	\$ 1224.00
d) Fee for Multiple Dependent Claims - \$230.00	\$ 0.00
	TOTAL FILING FEE \$ 2850.00

Statement(s) of Status as Small Entity
reducing Fee by one-half to \$1425.00

A check in the amount of \$1425.00 to cover the fee for filing the application.

The Commissioner is hereby authorized to charge any fees that may be required in this application during its entire pendency, or credit any overpayment, to Deposit Account No. 08-1641. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 08-1641 during the entire pendency of this application. This sheet is filed in duplicate.

CORRESPONDENCE ADDRESS

NAME	Stephanie Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe	
Address	4250 Executive Square, 7th Floor, La Jolla, CA 92037	
	Telephone: 858.450.8400	Facsimile: 858.587-5360

Submitted by:

Typed or printed name	Stephanie Seidman	Reg. Number	33,779
Signature		Date	01/06/00

000000-2000-0000-0000-000000000000